OR

OR

TOTAL

ADD'L FEE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it disp PATENT APPLICATION FEE DETERMINATION RECORD Applic												plays a valid OMB control numi		
Substitute for Form PTO-875											09905/01			
CLAIMS AS FILED ~ PART I (Column 1) (Column 2) SMALL ENTITY											OR	OTHER THAN SMALL ENTITY		
FOR			NUMBER FILED			NUMBER EXTRA			RATE	FEE		RATE	FEE	
BASIC FEE (37 CFR 1.16(a))										s	OR		\$	
TOTAL CLAIMS (37 CFR 1.16(c))				minus 20 =				1	x \$=		OR	x \$=		
INDEPENDENT CLAIMS (37 CFR 1.16(b))				minus 3 =					x \$ =		OR	× \$=		
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))								+ \$=		OR	+ \$ =			
* If the difference in column 1 is less than zero, enter *0* in column 2.								TOTAL		OR	TOTAL			
	C	LAIMS /	AS AM	ENDED) – PART	H					_			
	(Column 1) (Column 2) (Column 3)								SMALL	ENTITY	OR	OTHER THAN SMALL ENTITY		
AMENDMENT A	CLAIMS REMAININ AFTER AMENDMEI		INING ER		HIGHE NUMB PREVIOU PAID F	ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
M	Total (37 CFR 1.16(c))	•		Minus			=		x \$=		OR	x \$=		
FEN	Independent (37 CFR 1.16(b))	•		Minus	•••		=		x \$=		OR	x \$=		
Z	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))								+5 =		OR	+\$ =		
				_					TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
		(Colum	n 1)		(Colun	nn 2)	(Column 3)			· · · · · · · · · · · · · · · · · · ·	4			
AMENDMENT B		CLAI REMAI AFTI AMEND	NING ER		HIGHE NUMBE PREVIOU PAID FO	ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total (37 CFR 1.16(c))	. /	2	Minus	"23	3	=		× \$=		OR	x \$=		
N N	Independent (37 CFR 1.16(b))	•	/	Minus	" /	3	=		x s =		OR	x \$_ =		
₹	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))								+ \$ =		OR	+\$ =		
									TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
	<u>_</u> <u>_</u>	(Colum	n 1)		(Colum	n 2)	(Column 3)		'		•		بماسي	
ENTC		CLAII REMAII AFTE AMENDI	NING R		HIGHES NUMBE PREVIOU PAID FO	R ISLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
ENDMEN	Total (37 CFR 1.16(c))	•		Minus	**		=		x \$ =		OR	× \$=		
Z L	Independent (37 CFR 1.16(b))	•		Minus	•••		=		x \$=		OR	× \$=		

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))

TOTAL

ADD'L FEE

[•] If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

• If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20 BEST AVAILABLE Proviously Paid For" IN THIS SPACE is less than 3, enter "3". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". DEDI AVAILADLE
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.